BEST AVAILABLE COPY

Effective November 10, 1998											
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE OR			OTHER THAN	
FO	PR	NUM	BER FILED	NUMBER I	EXTRA	RATE	FEE	1 [RATE	FEE	
BA	SIC FEE					13	380.00	OR		760.00	
то	TAL CLAIMS		23 minus 20= * 3			X\$ 9=	:	OR	X\$18=	54	
IND	EPENDENT CL	AIMS) minus 3 = *			X39=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT						+130=		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	814	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMAL	OTHER THAN SMALL ENTITY OR SMALL ENTITY				
ENT A		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	* 3/)	Minus	** 23	= 7	X\$ 9=	:	OR	X\$18=	120	
AME	Independent	* 5	Minus	***2	= 2	X39=		OR	X78 -] 4	168	
	FIRST PRESE	NIATION OF	MULTIPLE DEP	PENDENT CLAIM		+130=		OR	+260=	Ô	
						TOTA ADDIT. FI		OR	TOTAL ADDIT. FEE	294	
		(Column 1	1)	(Column 2)	(Column 3)	7.0011.11					
MENDMENT B		CLAIMS REMAINING AFTER AMENDMEN	744	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	=	X\$ 9=	-	OR	X\$18=		
AME	Independent	*	Minus	***	=	X39=		OR	X78=		
_	FIRST PRESE	NTATION OF	MULTIPLE DEF	PENDENT CLAIM		+130=		OR	+260=		
						TOT	AL	OR	TOTAL		
		(Column 1	1)	(Column 2)	(Column 3)	ADDIT. FI	EE L] •	ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMEN	G	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDM	Total	.*	Minus	**	=	X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***	=	X39=		1	X78=		
<u> </u>	FIRST PRESE	NTATION OF	MULTIPLE DEF	PENDENT CLAIM]			OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									+260=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										
				r Independent) is th		r found in the	appropriate bo	x in co	olumn 1.		

Application or Docket Number